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(CS) field
NEWS 4 AUG 24 ENCOMPLIT/ENCOMPLIT2 reloaded and enhanced

NEWS 5 AUG 24 CA/CAplus enhanced with legal status information for U.S. patents
NEWS 6 SEP 09 50 Millionth Unique Chemical Substance Recorded in

CAS REGISTRY
NEWS 7 SEP 11 WPIDS, WPINDEX, and WPIX now include Japanese FTERM

thesaurus

AND CURRENT DISCOVER FILE IS DATED 06 APRIL 2009.

NEWS EXPRESS MAY 26 09 CURRENT WINDOWS VERSION IS V8.4,

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=> file hcaplus

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FILE 'HCAPLUS' ENTERED AT 17:34:33 ON 19 OCT 2009

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FILE COVERS 1907 - 19 Oct 2009 VOL 151 ISS 17
FILE LAST UPDATED: 18 Oct 2009 (20091018/ED)
REVISED CLASS FIELDS (/NCL) LAST RELOADED: Aug 2009
USPTO MANUAL OF CLASSIFICATIONS THESAURUS ISSUE DATE: Aug 2009

HCAplus now includes complete International Patent Classification (IPC) reclassification data for the third quarter of 2009.

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This file contains CAS Registry Numbers for easy and accurate substance identification.

-> s neoplastic () disease
7156 NEOPLASTIC
24 NEOPLASTICS
71604 NEOPLASTICS
(NEOPLASTIC OR NEOPLASTICS)
1186801 DISEASE
330238 DISEASES
133537 DISEASE
(DISEASE OR DISEASES)
L1 2745 NEOPLASTIC (W) DISEASE

=> s l1 () inhibit? 2189130 INHIBIT? L2 6 L1 (W) INHIBIT?

=> s 12 and review/dt 2306050 REVIEW/DT

L3 0 L2 AND REVIEW/DT

=> d 12, ibib abs, 1-6
THE ESTIMATED COST FOR THIS REQUEST IS 18.00 U.S. DOLLARS
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L2 ANSWER 1 OF 6 HCAPLUS COPYRIGHT 2009 ACS on STN ACCESSION NUMBER: 2006:1066837 HCAPLUS DOCUMENT NUMBER: 145:419133

TITLE: Preparation of 1-substituted pyrazolo[3,4-c]pyridines,

6,7,8,9-tetrahydro/pyrazolo[3,4-c]quinolines, and pyrazolo[3,4-c]naphthyridines as modulators of cytokine biosynthesis for treatment of viral and

neoplastic diseases

INVENTOR(S): Hays, David S.; Prince, Ryan B.; Haraldson, Chad A.;

Bonk, Jason D. 3M Innovative Properties Company, USA

PATENT ASSIGNEE(S): 3M Innovative Propertie SOURCE: PCT Int. Appl., 152pp.

CODEN: PIXXD2 Patent

DOCUMENT TYPE: LANGUAGE:

LANGUAGE: English FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PA	TENT :	NO.			KIN	D	DATE				ICAT	DATE										
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		CN,	CO,	CR,	CU,	CZ,	DE,	DK,	DM,	DZ,	EC,	EE,	EG,	ES,	FI,	GB,	GD,					
		GE,	GH,	GM,	HR,	HU,	ID,	IL,	IN,	IS,	JP,	KE,	KG,	KM,	KN,	KP,	KR,					
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		MZ,	NA,	NG,	NI,	NO,	NZ,	OM,	PG,	PH,	PL,	PT,	RO,	RU,	SC,	SD,	SE,					
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		VN,	YU,	ZA,	ZM,	ZW																
	RW:	ΑT,	BE,	BG,	CH,	CY,	CZ,	DE,	DK,	EE,	ES,	FΙ,	FR,	GB,	GR,	HU,	ΙE,					
		IS,	IT,	LT,	LU,	LV,	MC,	NL,	PL,	PT,	RO,	SE,	SI,	SK,	TR,	BF,	ВJ,					
		CF,	CG,	CI,	CM,	GΑ,	GN,	GQ,	GW,	ML,	MR,	NE,	SN,	TD,	TG,	BW,	GH,					
		GM,	ΚE,	LS,	MW,	ΜZ,	NA,	SD,	SL,	SZ,	TZ,	UG,	ZM,	ZW,	AM,	ΑZ,	BY,					
			ΚZ,																			
															20060331							
	2602																					
EP	1863																					
	R:										ES,											
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			HR,																			
	2008																					
	2009						2009	0625								0081						
PRIORIT:	Y APP	LN.	INFO	. :							005-					0050						
															P 20051103							
OTHER C										WO 2	006-	US12:	263		₩ 2	0060	331					

OTHER SOURCE(S): CASREACT 145:419133; MARPAT 145:419133

GI

Title compds. [I; Z = a bond, alkylene, (CH2)0-2-0-(CH2)0-2; o-phenylene, AB etc.; X = a bond, alkylene, -O-alkylene-; R1 = H, OH and derivs., F, NH2 and derivs., etc.; Y = (CH2)m; m = 1-5; RA, RB = independently H, halo, alk(en)yl, alkoxy, alkylthio, NH2 and derivs.; or RACCRB = fused hetero/aryl, or fused 5-7 membered saturated ring; R2 = H, alkyl, alkoxyalkenyl, haloalkenyl, etc.; and their pharmaceutically acceptable salts; with provisos] were prepared as immunomodulators for inducing cytokine biosynthesis in animals and in the treatment of diseases including viral and neoplastic diseases. For example, bromination of 5-[(4-hydroxytetrahydro-2H-pyran-4-y1)methyl]-1-methyl-1H-pyrazole-3carbonitrile (preparation given), coupling with 2-aminophenylboronic acid. HCl and cyclization gave pyrazologuinoline II (no data for the coupling intermediate). Certain I modulated cytokine biosynthesis by inducing the production of interferon a and/or tumor necrosis factor α when tested in human cells (no data).

OS.CITING REF COUNT: THERE ARE 1 CAPLUS RECORDS THAT CITE THIS RECORD (1 CITINGS)

REFERENCE COUNT:

THERE ARE 6 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

ANSWER 2 OF 6 HCAPLUS COPYRIGHT 2009 ACS on STN ACCESSION NUMBER: 2005:493478 HCAPLUS

DOCUMENT NUMBER: 143:43875

TITLE: Preparation of hydroxylamine and oxime substituted imidazoquinolines, imidazopyridines, and

imidazonaphthyridines as inducers of cytokine biosynthesis for treatment of viral and neoplastic

diseases INVENTOR(S):

Krepski, Larry R.; Dellaria, Joseph F., Jr.; Duffy, Daniel E.; Amos, David T.; Zimmermann, Bernhard M.; Squire, David J.; Marszalek, Gregory J.; Heppner,

Philip D.; Kshirsagar, Tushar A.

PATENT ASSIGNEE(S): 3M Innovative Properties Company, USA

PCT Int. Appl., 305 pp. CODEN: PIXXD2 SOURCE:

DOCUMENT TYPE: Patent

LANGUAGE: English FAMILY ACC. NUM. COUNT: 2

PATENT :	INFOR	MATI	ON:														
	PATENT NO.						DATE				ICAT						
WO		A2		2005	0609					20041124							
		CN, GE, LK, NO, TJ, BW, AZ,	CO, GH, LR, NZ, TM, GH, BY,	CR, GM, LS, OM, TN, GM, KG,	CU, HR, LT, PG, TR, KE, KZ,	CZ, HU, LU, PH, TT, LS, MD,	DE, ID, LV, PL, TZ, MW, RU,	DK, IL, MA, PT, UA, MZ, TJ,	DM, IN, MD, RO, UG, NA, TM,	DZ, IS, MG, RU, US, SD, AT,	BG, EC, JP, MK, SC, UZ, SL, BE, IT,	EE, KE, MN, SD, VC, SZ, BG,	EG, KG, MW, SE, VN, TZ, CH,	ES, KP, MX, SG, YU, UG, CY,	FI, KR, MZ, SK, ZA, ZM, CZ,	GB, KZ, NA, SL, ZM, ZW, DE,	GD, LC, NI, SY, ZW AM, DK,
		SE,	SI,	SK,		BF,					CM,						
CA EP		085 992 AT, IE,	BE,	CH,	A1 A2 DE, RO,	DK,	2005 2006 ES, TR,	0609 0809 FR, BG,	GB,	CA 2 EP 2 GR, EE,	004- 004- IT, HU,	2547 8122 LI, PL,	085 35 LU, SK,	NL,	2 SE,	0041 0041 MC,	124 124 PT,
US IN ZA	US 20070099901					20070131 CN 2004-80040953 20070517 JP 2006-591442 20070503 US 2006-595859 20070608 IN 2006-CN1847 20070425 ZA 2006-5216 US 2003-524961P P US 2004-580139P P US 2004-581293P P WO 2004-US39673 W						2 2 2 2 P 2 P 2 P 2 P 2 P 2 P 2 P 2 P 2	20060518 20060525 20060623 20031125 20040616 20040618				
OTHER S						CASREACT 143:43875; MARPAT 143:43875											

Title compds. [I; Z = -C(:N-OR2)- or CH-N(OR2)(YR3); X = CHR9,-AB CH(R9)-alk(en)ylene-, etc.; R9 = H, alkyl; R1 = H, (un)substituted alkyl, alkylene/hetero/aryl, etc.; R2, R3 = independently H, (un)substituted alk(en)yl, hetero/aryl, hetero/arylalkylenyl, etc.; Y = a bond, C:O, C:S, SO2, etc.; RA, RB = independently H, halo, alk(en)yl, etc.; RACCRB = (un) substituted fused hetero/aryl, fused 5-7-membered saturated ring), were prepared as immunomodulators for inducing cytokine biosynthesis in animals and in the treatment of diseases including viral and neoplastic diseases. For example, reacting 5-[4-Amino-2-(ethoxymethyl)-1H-imidazo[4,5c]quinolin-1-yl]pentan-2-one with NH2OH+HCl in the presence of NaBH3CN/AcOH/EtOH, and substitution with mesyl anhydride gave imidazoquinoline II (m.p. = 146-148°). Certain I may modulate cytokine biosynthesis by inhibiting production of tumor necrosis factor $TNF-\alpha$ when tested in mouse cells (no data). REFERENCE COUNT: THERE ARE 2 CITED REFERENCES AVAILABLE FOR THIS

L2 ANSWER 3 OF 6 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2005:490270 HCAPLUS

DOCUMENT NUMBER: 143:26611

TITLE: Preparation of oxime substituted imidazo-containing compounds, particularly imidazoquinolines, as inducers

of cytokine biosynthesis for treatment of viral and

RECORD, ALL CITATIONS AVAILABLE IN THE RE FORMAT

neoplastic diseases

INVENTOR(S): Krepski, Larry R.; Dellaria, Joseph F., Jr.; Duffy,

Daniel E.; Radmer, Matthew R.; Amos, David T.

PATENT ASSIGNEE(S): 3M Innovative Properties Company, USA

SOURCE: PCT Int. Appl., 200 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent LANGUAGE: English

FAMILY ACC. NUM. COUNT: 2 PATENT INFORMATION:

PA:	PATENT NO.						DATE			APPL	ICAT		DATE					
WO		0513	17		A2		2005	0609					20041124					
	W:	CN, GE, LK, NO,	CO, GH, LR, NZ,	CR, GM, LS, OM,	CU, HR, LT, PG,	CZ, HU, LU, PH,	AU, DE, ID, LV, PL, TZ,	DK, IL, MA, PT,	DM, IN, MD, RO,	DZ, IS, MG, RU,	EC, JP, MK, SC,	EE, KE, MN, SD,	EG, KG, MW, SE,	ES, KP, MX, SG,	FI, KR, MZ, SK,	GB, KZ, NA, SL,	GD, LC, NI, SY,	
		BW, AZ, EE, SE, NE,	GH, BY, ES, SI, SN,	GM, KG, FI, SK, TD,	KE, KZ, FR, TR,	LS, MD, GB, BF,	MW, RU, GR, BJ,	MZ, TJ, HU, CF,	NA, TM, IE, CG,	SD, AT, IS, CI,	SL, BE, IT, CM,	SZ, BG, LU, GA,	TZ, CH, MC, GN,	UG, CY, NL, GQ,	ZM, CZ, PL, GW,	ZW, DE, PT, ML,	AM, DK, RO, MR,	
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		547020 687307												20041124				
		IE,	SI,	FI,	RO,	CY,	ES, TR,	BG,	CZ,	EE,	HU,	PL,	SK,	IS				
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95	2007.	0123	/ 0		2.1		2007	1231		SG 2	000-	8728	<i>></i> /		2	0041	124	
MX	2006	0059	10		A		2006	0823	JP 2006-541697 SG 2008-8728 MX 2006-5910					20041124				
IN	2006	CN01	848		A		2007	0608		IN 2	006-	CN18	48		2	0060	525	
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	2006				A		2007	0425		ZA 2	006- 003-	5216			2	0060	623	
PRIORIT:	Y APP	LN.	INFO	. :											0031 0040			
											004-					0040		
OTHER SO	OURCE	(S):			CAS	REAC	T 14	3:26							" 2	0041	127	

$$\begin{array}{c|c} & \text{NH2} \\ & \text{N} & \text{R2} \\ & \text{R?} & \text{X-Z} & \text{R1} \\ & & \text{I} \end{array}$$

AB Title compds. II; X = alkylene optionally interrupted by one or more -0-; Z = CiO, - C(:0)-C, -C(:03)2-; Rl = H, (un)substituted alkyl, alkylene/aryl, alkylene/heteroaryl; Q = O, S; R3 = (un)substituted alk(en/yn)yl, alkylene/aryl, alkylene/heteroaryl; R2 = H, (un)substituted alk(en/yn)yl, hetero/aryl, alkylenealkyl, etc.; RA, RB = independently H, halo, alk(en)yl, alkoxy, alkylthio, NH2 and derivs.; or RACCRB = (un)substituted fused aryl ring or fused 5-7-membered saturated ring; and their pharmaceutically acceptable salts], were prepared as immunomodulators for inducing cytokine biosynthesis in animals and in the treatment of diseases including viral and neoplastic diseases. For example, II was prepared by reacting 4-(2-Butyl-IH-indiazo(4,5-C)quinolin-1-yl)butyraldehyde (preparation given) with MeMgBr, followed by oxidation, reductive amination of the ketone, oxidation with m-CPBA/reaction with NH4OR. I have been found to induce cytokine biosynthesis by inhibiting production of tumor necrosis factor TNF-a when tested on an in vitro human blood cell system (no data).

OS.CITING REF COUNT: 1 THERE ARE 1 CAPLUS RECORDS THAT CITE THIS RECORD
(1 CITINGS)

RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L2 ANSWER 4 OF 6 HCAPLUS COPYRIGHT 2009 ACS on STN ACCESSION NUMBER: 2005:177837 HCAPLUS

DOCUMENT NUMBER: 142:280205

TITLE: Preparation of hydroxylamine substituted

imidazo-containing compounds as inducers of cytokine biosynthesis for treatment of viral and neoplastic

THERE ARE 6 CITED REFERENCES AVAILABLE FOR THIS

disease

Zimmermann, Bernhard M.

PATENT ASSIGNEE(S): 3M Innovative Properties Company, USA

SOURCE: PCT Int. Appl., 254 pp.

CODEN: PIXXD2

REFERENCE COUNT:

DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

PA	TENT	NO.			KIND DATE						ICAT				DATE					
			56		A2 20050303 A3 20050929						20040812									
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							ID,													
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							TZ,													
	RW:						MW,													
							RU,													
							GR,													
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2.11	2004		TD,		2.1		2005	0202		7 TT 2	004	2000	E 0		2	0040	212			
										AU 2004-266658 CA 2004-2535120										
									EP 2004-780922											
Lie							ES.													
	14.						RO,											HR		
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JP	2007	5022	93		Т		2007	0208		JP 2	006-	5233	71		20040812 20040812					
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										US 2	003-	4946	08P		P 20030812					
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OTHER S	THER SOURCE(S):						T 14	2:28	0205	; MA	RPAT	142	:280	205						

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AB Title compds. [I; X = CHRZ, CHRZA; A = (un)substituted alkylene, alkenylene; Y = a bond, C(:0), C(:5), SO2, COO, CONH and derivs, etc.; Rl, R¹ = independently H, (un)substituted alk(en)yl, aryl, etc.; RA, RB = independently H, halo, alk(en)yl, alkoxy, alkylthio, NR2 and derivs; or RACCRB = (un)substituted fused hetero/aryl, fused 5- to 7-membered saturated ring; R¹ = H, non-interfering substituent; and their pharmaceutically acceptable salts], were prepared as immunomodulators for inducing cytokine biosynthesis in animals and in the treatment of diseases including viral and neoplastic diseases. For example, reacting 1-[3-(aminoxy)propyl]-2-propyl-1H-imidazo[4,5-c]quinolin-4-amine (preparation given) with cyclopropanecarbonyl chloride gave title compound II (m.p. = 103-105°). Thus, induced interferon and tumor necrosis factor in human cells (no data).

REFERENCE COUNT:

THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

^{*} STRUCTURE DIAGRAM TOO LARGE FOR DISPLAY - AVAILABLE VIA OFFLINE PRINT *

L2 ANSWER 5 OF 6 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2005:177833 HCAPLUS

DOCUMENT NUMBER: 142:280204

TITLE: Preparation of oxime substituted imidazo-containing compounds as inducers of cytokine biosynthesis for

treatment of viral and neoplastic disease

INVENTOR(S): Kshirsagar, Tushar; Amos, David T.; Dellaria, Joseph

F., Jr.; Heppner, Philip D.; Langer, Scott E.;

Zimmermann, Bernhard M.

PATENT ASSIGNEE(S): 3M Innovative Properties Company, USA

SOURCE: PCT Int. Appl., 348 pp.

CODEN: PIXXD2 DOCUMENT TYPE: Patent English

LANGUAGE: FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

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		NO,	NZ,	OM,	PG,	PH,	PL,	PT,	RO,	RU,	SC,	SD,	SE,	SG,	SK,	SL,	SY,		
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		SI,	SK,	TR.	BF.	BJ,	CF.	CG,	CI,	CM,	GA,	GN,	GO,	GW,	ML,	MR,	NE.		
		SN,	TD,	TG															
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CA	2535	117			A1		2005	0303		CA 2	004-	2535		2	0040	812			
EP	1653	914			A2 20060510					EP 2004-780839						20040812			
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CN	1010	9467	0		A		2007	1226		CN 2	004-	8002		2	0040	812			
US	2007	0066	639		A1		2007	0322		CN 2004-80023366 US 2006-595065						0060	126		
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IN	2006	CN00	516		A		2007	0622		IN 2	006-	CN51	6		2	0060	210		
RIORITY	Y APP	LN.	INFO	. :						US 2	003-	4946	05P	1	P 2	0030	812		
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* STRUCTURE DIAGRAM TOO LARGE FOR DISPLAY - AVAILABLE VIA OFFLINE PRINT * AB Title compds. [I; X = CHR2A; A = alkylene, alkenylene optionally

GI

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interrupted by one or more O; R1, R' = independently H, (un)substituted
     alk(en)yl, hetero/aryl, hetero/arylalkylenyl, heterocyclyl,
     heterocyclylalkylenyl, etc.; RA, RB = independently H, halo, alk(en)yl,
     alkoxy, alkylthio, NH2 and derivs.; or RACCRB = (un)substituted fused
     hetero/aryl, fused 5- to 7-membered saturated ring; R'' = H, non-interfering
     substituent; and their pharmaceutically acceptable salts], were prepared as
     immunomodulators for inducing cytokine biosynthesis in animals and in the
     treatment of diseases including viral and neoplastic diseases. Thus,
     reacting 4-fluorobenzaldehyde with
     1-[3-(aminooxy)propy1]-2-propy1-1H-imidazo[4,5-c]quinolin-4-amine (preparation
     given) in MeOH gave oxime II. I induced interferon and tumor necrosis
     factor in human cells (no data).
OS.CITING REF COUNT:
                        2
                               THERE ARE 2 CAPLUS RECORDS THAT CITE THIS RECORD
                               (2 CITINGS)
REFERENCE COUNT:
                               THERE ARE 2 CITED REFERENCES AVAILABLE FOR THIS
                               RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT
   ANSWER 6 OF 6 HCAPLUS COPYRIGHT 2009 ACS on STN
ACCESSION NUMBER:
                         1949:1122 HCAPLUS
DOCUMENT NUMBER:
                         43:1122
ORIGINAL REFERENCE NO.: 43:307h-i
TITLE:
                         Effect of normal blood serum and blood serum from
                         neoplastic disease on cell proliferation in bone
                         marrow cultures
AUTHOR(S):
                         Norris, Earl R.; Majnarich, John J.
SOURCE:
                         American Journal of Physiology (1948), 153, 483-7
                         CODEN: AJPHAP: ISSN: 0002-9513
                         Journal
DOCUMENT TYPE:
LANGUAGE:
                         Unavailable
AB cf. C.A. 42, 7883f. Normal blood serum accelerates the rate of cell
     proliferation in bone marrow cultures in vitro. Blood serum in cases of
     pernicious anemia, leukemia and neoplastic disease
     inhibits cell proliferation in such cultures. The accelerating
     substance present in normal serum and the inhibiting substance present in
     blood serum in cases of neoplastic disease counteract each other.
=> d his
     (FILE 'HOME' ENTERED AT 17:34:06 ON 19 OCT 2009)
     FILE 'HCAPLUS' ENTERED AT 17:34:33 ON 19 OCT 2009
           2745 S NEOPLASTIC () DISEASE
              6 S L1 () INHIBIT?
              0 S L2 AND REVIEW/DT
=> s VEGF () receptor?
         30909 VEGF
           231 VEGFS
         30929 VEGF
                 (VEGF OR VEGFS)
        993539 RECEPTOR?
          4213 VEGF (W) RECEPTOR?
=> s 14 () inhibit?
       2189130 INHIBIT?
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1.2

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L6

120 L4 (W) INHIBIT?

3 L5 AND NEOPLAST?

=> s 15 and neoplast? 71713 NEOPLAST?

=> s 16 and review/dt 2306050 REVIEW/DT L7 0 L6 AND REVIEW/DT => s 15 and review/dt 2306050 REVIEW/DT 1.8 22 L5 AND REVIEW/DT => d 18, ibib abs hitstr, 1-22 THE ESTIMATED COST FOR THIS REQUEST IS 124.08 U.S. DOLLARS DO YOU WANT TO CONTINUE WITH THIS REQUEST? (Y) /N:y ANSWER 1 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN ACCESSION NUMBER: 2009:1181014 HCAPLUS TITLE: Role of everolimus in the treatment of renal cell carcinoma AUTHOR(S): George, Saby; Bukowski, Ronald M. CORPORATE SOURCE: Division of Hematology and Oncology, University of Texas Health Sciences Center, San Antonio, TX, USA Therapeutics and Clinical Risk Management (2009), 5, SOURCE: 699-706 CODEN: TCRMA6: ISSN: 1178-203X URL: http://www.dovepress.com/getfile.php?fileID=5207 PUBLISHER: Dove Medical Press (NZ) Ltd. DOCUMENT TYPE: Journal; General Review; (online computer file) LANGUAGE: English AB A review. The therapeutic options in metastatic renal cell carcinoma have been recently expanded by the discovery of the VHL gene, the mutation of which is associated with development of clear cell carcinoma, and overexpression of the angiogenesis pathway, resulting in a very vascular tumor. This breakthrough in science led to the development of a variety of small mols, inhibiting the VEGF-dependent angiogenic pathway, such as sunitinib and sorafenib. These agents prolong overall and progression-free survival, resp. The result was the development of robust front-line therapies which ultimately fail and are associated with disease progression. In this setting, there existed an unmet need for developing second-line therapies for patients with refractory metastatic renal cell carcinoma (MRCC). Everolimus (RAD 001) is an oral inhibitor of the mammalian target of rapamycin (mTOR) pathway. The double-blind, randomized, placebo-controlled phase III trial of everolimus (RECORD-1) conducted in MRCC patients after progression on sunitinib or sorafenib, or both, demonstrated a progression-free survival benefit favoring the study drug (4.9 mo vs 1.9 mo, HR 0.33, 95% CI 0.25 to 0.43, P ≤ 0 0.001).

Everolimus thus established itself as a standard of care in the second-line setting for patients with MRCC who have failed treatment with VEGF

THERE ARE 25 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

REFERENCE COUNT:

receptor inhibitors.

25

L8 ANSWER 2 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2009:790381 HCAPLUS

DOCUMENT NUMBER: 151 - 115426

TITLE: Angiopreventive role of vitamins

Josko, Jadwiga; Ratman, Rajmund; Ratman, Katarzyna AUTHOR(S): CORPORATE SOURCE: Katedra i Zakl. Med. i Epidemiol. Srodowiskowej Zabrze, Slaski Uniw. Med. Katowice, Zabrze, 41-800,

SOURCE: Wspolczesna Onkologia (2008), 12(4), 168-172 CODEN: WOSNBU; ISSN: 1428-2526

PUBLISHER: Termedia sp. z o.o. Wydawnictwo Medyczne

DOCUMENT TYPE: Journal; General Review

LANGUAGE: Polish

A review. The process of angiogenesis allows neoplasm growth and accelerates tumor metastasis formation. The possibility of using vitamins in angiogenesis control is discussed. In vivo and in vitro studies show that vitamins can inhibit excessive angiogenesis. The mechanisms of angiogenesis inhibition by vitamins involve transcription of genes of angiogenic factors (such as VEGF - vascular endothelial growth factor),

decreased expression of VEGF receptors.

inhibition of the activation of transcription factors, decrease of angiopoietin 2 levels, increased apoptosis of endothelial cells, glutathione peroxidase inhibition, inhibition of tyrosine kinase activity, etc. The roles of vitamins A, B6, C, D, E, and folic acid are examined in

more detail. It is possible that vitamins, whose roles in these mechanisms are underestimated, may significantly support components of antitumor therapy.

ANSWER 3 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2009:212953 HCAPLUS

DOCUMENT NUMBER: 151:138934

TITLE: Progress on molecular target therapy of head and neck

malignant tumor

AUTHOR(S): Zhou, Xiaojuan; Ma, Hailin CORPORATE SOURCE: The First Affiliated Hospital, Xian Jiaotong

University, Xian, Shaanxi Province, 710061, Peop. Rep.

China

SOURCE: Xiandai Zhongliu Yixue (2008), 16(1), 138-140

CODEN: XZYIAU; ISSN: 1672-4992 PUBLISHER: Xiandai Zhongliu Yixue Bianjibu

Journal: General Review

DOCUMENT TYPE:

LANGUAGE: Chinese

AB A review. The applications of mol. target drugs in therapy of head and neck malignant tumor were reviewed, including EGFR inhibitions, anti-EGRF monoclonal antibody. VEGF receptor inhibitions

, and so on.

L8 ANSWER 4 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2008:1408039 HCAPLUS

DOCUMENT NUMBER: 150:468546

TITLE: Vascular endothelial growth factor as new drug target

in treatment of multiple myeloma

AUTHOR(S): Luo, Wenjuan; Xu, Wenlin

CORPORATE SOURCE: Renmin Hospital, Jiangsu University, Zhenjiang, 212002, Peop. Rep. China

SOURCE: Zhonghua Xueyexue Zazhi (2007), 28(10), 718-720 CODEN: CHTCD7; ISSN: 0253-2727

PUBLISHER . Zhongguo Yixue Kexuevuan Xuevexue Yanjiuso

DOCUMENT TYPE: Journal: General Review

LANGUAGE: Chinese

A review on regulation and pathophysiol. role of vascular endothelial growth factor (VEGF) in multiple myeloma (MM) and MM treatment based on VEGF with thalidomide and VEGF receptor tyrosine kinase inhibitor.

L8 ANSWER 5 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2008:166110 HCAPLUS

DOCUMENT NUMBER: 149:214754

TITLE: Angiogenesis inhibitor therapies: focus on

hypertension and kidney toxicity

AUTHOR(S): Izzedine, Hassan

CORPORATE SOURCE: Service de Nephrologie, Hopital Pitie-Salpetriere,

Paris, F-75013, Fr.

SOURCE: Bulletin du Cancer (2007), 94(11), 981-986

CODEN: BUCABS; ISSN: 0007-4551

John Libbey Eurotext PUBLISHER: DOCUMENT TYPE: Journal: General Review

LANGUAGE: French

A review. Developments in the knowledge of mol. biol. of cancer over the past 20 years have been identified. Angiogenesis is playing a key role in

the physiopathol, of cancer evolution. Several strategies have been developed to target angiogenesis for the treatment of metastatic RCC.

These include inhibition of VEGF receptors (

inhibition of the tyrosine kinase activity) or binding to the VEGF

protein. Several addnl. kinases inhibitions including PDGF receptors are also targeted. Anti-angiogenic drugs recently marketed or still under clin. development, may interact with the kidneys. Clin. and pathol., and

mechanisms of their renal toxicity are presented in this article.

OS.CITING REF COUNT: THERE ARE 1 CAPLUS RECORDS THAT CITE THIS RECORD 1

(1 CITINGS)

REFERENCE COUNT: 35 THERE ARE 35 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

ANSWER 6 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2007:1282475 HCAPLUS

DOCUMENT NUMBER: 148:165032

TITLE: Angiogenesis and renal cell carcinoma

AUTHOR(S): Billemont, Bertrand; Meric, Jean-Baptiste; Izzedine,

Hassan; Taillade, Laurent; Sultan-Amar, Valentine;

Rixe, Olivier CORPORATE SOURCE:

Service d'oncologie medicale, Hopital Pitie-Salpetriere, Paris, 75013, Fr.

Bulletin du Cancer (2007), 94(Spec.), S232-S240 SOURCE:

CODEN: BUCABS: ISSN: 0007-4551

John Libbey Eurotext PUBLISHER:

DOCUMENT TYPE: Journal; General Review

LANGUAGE: French

A review. Developments in the knowledge of mol. biol. of renal cell

carcinoma (RCC) over the past 20 years have been identified. Angiogenesis is playing a key role in the physiopathol. of RCC. Von Hippel-Lindau (VHL) alterations, HIFα accumulation and vascular endothelial growth factor (VEGF) overexpression are important mediators of this process. Several stategies have been developed to target angiogenesis for the

treatment of metastatic RCC. These include inhibition of VEGF receptors (inhibition of the tyrosine kinase activity) or binding to the VEGF protein. Several addnl. kinases inhibitions including PDGF receptors are also targeted. Sunitinib (SU11248) is an orally biovailable small mol. that has demonstrated superiority over interferon- α for the treatment of metastatic RCC. In a recent randomized phase III study conducted in 750 patients, the response rate to sunitinib was 31 % and to interferon 6 %. The median of progression free survival (PFS) was 11 mo for sunitinib and 5 mo for interferon (p < 0.001). Sorafenib (BAY43-9006) was found to inhibit Rafl, but also VEGFR2 and 3, Flt3, PDGFR-a and b and c-kit, has been tested in a phase III study against placebo after one prior systemic therapy. The median of the time to progression (TTP) for sorafenib was 24 wk vs. 12 wk for patients in the placebo arm (p = 0,01). Other mols. tested in metastatic RCC will be

presented including axitinib, pazopanib and bevacizumab. OS.CITING REF COUNT:

THERE ARE 4 CAPLUS RECORDS THAT CITE THIS RECORD (4 CITINGS)

REFERENCE COUNT: 76 THERE ARE 76 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

ANSWER 7 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

2007:798379 HCAPLUS ACCESSION NUMBER:

DOCUMENT NUMBER: 147:108604

TITLE: Inhibition of VEGF signaling pathways in multiple

myeloma and other malignancies AUTHOR(S): Podar, Klaus; Anderson, Kenneth C.

CORPORATE SOURCE: Department of Medical Oncology, Harvard Medical

School, Boston, MA, USA SOURCE: Cell Cycle (2007), 6(5), 538-542

CODEN: CCEYAS; ISSN: 1538-4101

PUBLISHER: Landes Bioscience

DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

AB A review. Due to its direct effects on endothelial cells, circulatory endothelial progenitor cells, hematopoietic stem cells, immune cells, osteoclasts, osteoblasts and neurons, vascular endothelial growth factor (VEGF) is linked to tumor cell development, progression, metastatic osteolysis and drug resistance, as well as clin. features such as metastatic osteolysis. Importantly, recent advances in the understanding of mechanisms of action of antianglogenic drugs/VEGF-inhibitors have fundamentally changed treatment regimens in cancer. VEGF plays a key role not only in solid tumors but also in hematol. malignancies, including multiple myeloma (MM). Despite recent advances in our understanding of MM pathogenesis and novel therapies (bortezomib and lenalidomide), it remains incurable. Our own and others' work suggest that VEGF-inhibitors e.g., the small mol. VEGF receptor inhibitor

pazopanib, may also improve patient outcome in MM.

OS.CITING REF COUNT: THERE ARE 14 CAPLUS RECORDS THAT CITE THIS 14

RECORD (14 CITINGS)

REFERENCE COUNT: 48 THERE ARE 48 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 8 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2007:718530 HCAPLUS

DOCUMENT NUMBER: 147:514036

TITLE: CCR drug updates: Sorafenib and sunitinib in renal cell carcinoma

AUTHOR(S): Stein, Mark N.; Flaherty, Keith T.

CORPORATE SOURCE: Department of Medicine, Robert Wood Johnson Medical

School, The Cancer Institute of New Jersey, University of Medicine and Dentistry of New Jersey, New

Brunswick, NJ, USA

Clinical Cancer Research (2007), 13(13), 3765-3770 SOURCE:

CODEN: CCREF4: ISSN: 1078-0432

PUBLISHER: American Association for Cancer Research

DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

A review. The role of sorafenib and sunitinib antagonize VEGF receptor

tyrosine kinases of these agents as VEGFR inhibitors in renal cell carcinoma (RCC) and their unique spectra of activity are discussed.

OS.CITING REF COUNT: THERE ARE 7 CAPLUS RECORDS THAT CITE THIS RECORD (7 CITINGS)

REFERENCE COUNT: 45 THERE ARE 45 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 9 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2007:73318 HCAPLUS

DOCUMENT NUMBER: 146:517042

TITLE: Microenvironmental transformations by VEGF- and

EGF-receptor inhibition and potential implications for responsiveness to radiotherapy

AUTHOR(S): Bussink, Johan; Kaanders, Johannes H. A. M.; van der

Kogel, Albert J. CORPORATE SOURCE:

Department of Radiation Oncology, Radboud University Nijmegen Medical Centre, Neth.

Radiotherapy and Oncology (2007), 82(1), 10-17 SOURCE: CODEN: RAONDT; ISSN: 0167-8140

PUBLISHER: Elsevier B.V.

DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

A review. The microregional distribution and dynamics of tumor cell hypoxia and proliferation are important determinants of tumor aggressiveness and resistance to treatment. Modulation of these elements by biol. targeted drugs such as EGFR- and VEGFR-inhibitors may improve the effect of radiotherapy significantly. These combinations are being evaluated in clin. trials and evidence of their effectiveness is accumulating. However, the mechanistic basis of this cooperative effect and the role and behavior of the microregional tumor phenotype under EGFand VEGF-blockage is poorly understood. Unfolding of these interactions and effects further downstream is necessary to exploit these biol. modifiers most profitably to unravel questions such as: (1) can microregional phenotypes be modulated by EGFR- or VEGFR-blockage and how do downstream effects in the signaling pathways relate to these changes. (2) How do the microregional changes induced by EGFR- and VEGF-blockage affect the responsiveness of tumors to ionizing radiation. Answering these questions will improve our understanding of tumor growth related phenotypic transformations at the microregional level and how these can be influenced by modulation of the EGF- and VEGF-signaling pathways. This knowledge can be used to identify and improve therapeutic combinations with the novel biol. modifiers and test a variety of biol.-based treatment approaches.

OS.CITING REF COUNT: 6 THERE ARE 6 CAPLUS RECORDS THAT CITE THIS RECORD (6 CITINGS)

REFERENCE COUNT: 8.8 THERE ARE 88 CITED REFERENCES AVAILABLE FOR THIS

RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

ANSWER 10 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2006:1231965 HCAPLUS

DOCUMENT NUMBER: 146:92441

TITLE: The current role of angiogenesis inhibitors in the

treatment of renal cell carcinoma

AUTHOR(S): Choueiri, Toni K.; Bukowski, Ronald M.; Rini, Brian I.

CORPORATE SOURCE: Department of Solid Tumor Oncology, Cleveland Clinic Taussig Cancer Center, Cleveland, OH, USA

SOURCE: Seminars in Oncology (2006), 33(5), 596-606

CODEN: SOLGAV: ISSN: 0093-7754

PUBLISHER: Elsevier Inc.

DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

A review. Over the last few years, renal cell carcinoma (RCC) has become

a model disease for targeted therapeutics based on the growing understanding of the underlying mol. pathways in this disease. Clear cell

RCC is characterized by the inactivation of the von Hippel-Lindau (VHL) tumor-suppressor gene, which results in the dysregulation of hypoxia response genes, including an overprodn. of vascular endothelial growth factor (VEGF), which promotes tumor angiogenesis, growth, and metastasis. In advanced RCC, substantial clin. activity has been reported with VEGF

blockade employing a variety of approaches including antibodies and small-mol. VEGF receptor inhibitors. Many

trials are still in progress with the goal of defining the optimal utility of these agents as monotherapy or in combination. This review will describe the current clin. data with VEGF-targeted approaches in RCC and

plans for future development. OS.CITING REF COUNT:

THERE ARE 9 CAPLUS RECORDS THAT CITE THIS RECORD

(9 CITINGS)

REFERENCE COUNT: 83 THERE ARE 83 CITED REFERENCES AVAILABLE FOR THIS RECORD, ALL CITATIONS AVAILABLE IN THE RE FORMAT

ANSWER 11 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2006:548173 HCAPLUS

DOCUMENT NUMBER: 145:96528

TITLE: Advances in vascular endothelial growth factor and

anti-angiogenesis

AUTHOR(S): Chen, Xi; Liu, Lianxin

First Clinical Hospital, Harbin Medical University, CORPORATE SOURCE: Harbin, Heilongjiang Province, 150001, Peop. Rep.

China

Shijie Huaren Xiaohua Zazhi (2005), 13(16), 1996-2000 SOURCE:

CODEN: SHXZF2; ISSN: 1009-3079

PUBLISHER: Shijie Weichangbingxue Zazhishe

DOCUMENT TYPE: Journal; General Review

LANGUAGE: Chinese

A review summarized the structure, function, regulation and inhibitors of VEGF (vascular endothelial growth factor) and its receptor as well as their roles in angiogenesis.

L8 ANSWER 12 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2006:205613 HCAPLUS DOCUMENT NUMBER: 145:179897

TITLE: Medical treatment of Gastrointestinal Stromal Tumors:

state of the art and future perspectives
AUTHOR(S): Apice, Gaetano; Milano, Amalia; Bruni, Giovanni

Salvatore; Iaffaioli, Rosario Vincenzo; Caponigro,

Francesco

CORPORATE SOURCE: National Tumor Institute of Naples "Fondazione G. Pascale", Naples, 80131, Italy

SOURCE: Reviews on Recent Clinical Trials (2006), 1(1), 35-42

CODEN: RRCTB2; ISSN: 1574-8871
PUBLISHER: Bentham Science Publishers Ltd.

DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

AB A review. Gastrointestinal Stromal Tumor (GIST) is the most common

mesenchymal neoplasm of the gastrointestinal tract, and it is characterized by the occurrence, in > 90 % of cases, of a gain of function mutation in the c-kit proto-oncogene. STI-571 (imatinib meaylate), a selective KII tyrosine kinase inhibitor, has changed the natural history of this disease, since it has shown high effectiveness in metastatic GIST, and it is currently under investigation also in the adjuvant and neoadjuvant setting. Mechanisms of resistance to imatinib meaylate include both de novo, and, more frequently, acquired resistance, which may occur after several months of drug administration and possibly depends, in most cases, upon an acquired second mutation. In order to overcome imatinib meaylate resistance, the addition of other drugs may be considered

in patients who have less than an optimal response to imatinib mesylate monotherapy. Investigational agents that are being studied in this setting include the mammalian target of rapamycin (mTOR) inhibitor RAD 001 and the protein kinase C lnhibitor PKC412. In addition, other KIT tyrosine

kinase inhibitors with anti-VEGF receptor inhibitory activity, such as SU11248, PTK787/ZK787 and AMG 706,

are currently being explored as second line monotherapy for imatinib mesylate-resistant GIST. Finally, another new drug, ecteinascidin (ET-743), that blocks cell cycle progression in G2/M phase through a p53-independent apoptotic mechanism, has shown important preclin. and

clin. activity against a number of human solid tumors, including GIST.
OS.CITING REF COUNT: 1 THERE ARE 1 CAPLUS RECORDS THAT CITE THIS RECORD

(1 CITINGS)

REFERENCE COUNT: 64 THERE ARE 64 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 13 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2006:50281 HCAPLUS

DOCUMENT NUMBER: 144:362423

TITLE: Molecular mechanisms and targeting of colorectal

cancer

AUTHOR(S): CORPORATE SOURCE: Vanhoefer, Udo
Department of Medicine, Medical Oncology and

Hematology, Gastroenterology, and Infectious Disease,

Marienkrankenhaus, Hamburg, Germany

SOURCE: Seminars in Oncology (2005), 32(6, Suppl. 8), S7-S10

CODEN: SOLGAV; ISSN: 0093-7754

PUBLISHER: Elsevier Inc.

DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

AB A review. Targeted therapies that are approved for metastatic colorectal

cancer are divided into two groups: those affecting vascular endothelial growth factor (VEGF) known to interrupt tumor growth and metastasis (also called neo-angiogenesis), and agents that affect the tumor directly by interrupting the epidermal growth factor (EGF) and its receptor. Anti-angiogenic VEGF therapies are divided into two categories: one affecting the VEGF ligand, such as bevacizumab, and those that inhibit the VEGF receptor, such as PTK/ZK. Epidermal growth factor receptor (EGFR) therapies are divided into monoclonal antibodies that affect EGFR, such as cetuximab, and EGFR tyrosine kinase inhibitors, such as gefficacy in first-line, combination therapy settings. Future targeted therapeutic strategies include gene profiling, combinations of capecitablne and oxaliplatin, with bevacizumab and/or cetuximab therapies.

REFERENCE COUNT: 18 THERE ARE 18 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 14 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2006:40297 HCAPLUS

DOCUMENT NUMBER: 144:444742

TITLE: Cytokine targets in the treatment of myelodysplastic

syndromes

AUTHOR(S): Verma, Amit; List, Alan F.

CORPORATE SOURCE: Department of Medicine (Oncology), Albert Einstein

Cancer Center, Bronx, NY, 10461, USA Current Hematology Reports (2005), 4(6), 429-435

SOURCE: Current Hematology Reports (20)
CODEN: CHRUEI; ISSN: 1540-3408

PUBLISHER: Current Science Inc.

DOCUMENT TYPE: Journal: General Review

LANGUAGE: English

B A review. Myelodysplastic syndromes (MDS) are characterized by refractory cytopenias due to ineffective hematopoiesis in the marrow. Cytokines play an important role in the regulation of hematopoiesis; dysregulation of their levels can lead to hematopoietic failure. Considerable evidence implicates tumon necrosis factor a, transforming growth factor

β, interferons, interleukin 1β, vascular endothelial growth

p, interferons, interleukin ip, vascular enootheilal growin factor (VEGF), and other inhibitory cytokines in the pathogenesis of MDS. These cytokines are produced by the interactions between the MDS clone and the bone marrow microenvironment. Therapeutic strategies therefore may augment the action of stimulatory growth factors or disrupt the effects of myelosuppressive cytokines. Erythropoietin alone and in combination with low-dose granulocyte colony-stimulating factor can lead to erythroid responses in selected patients. Agents targeting inhibitory cytokines include thalidomide, lenalidomide, etamercept, infliximab, VEGF receptor inhibitor PTK-787, antithymocyte globulin, and SCIO-469, a p38 mitoden-activated protein kinase inhibitor. Given the

biol. heterogeneity of MDS, no single treatment is effective for all patients with the disease. With more detailed knowledge of cytokine signaling cascades, coupled with technol. improvements in genomics and proteomics, the future treatment of this challenging disease may lie in combination therapies customized for relevant biol. effectors.

combination therapies customized for relevant biol. effectors.

OS.CITING REF COUNT: 8 THERE ARE 8 CAPLUS RECORDS THAT CITE THIS RECORD

DS.CITING REF COUNT: 8 THERE ARE 8
(8 CITINGS)

REFERENCE COUNT: 57 THERE ARE 57 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 15 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2005:993266 HCAPLUS

DOCUMENT NUMBER: 144:16256

TITLE: Therapy targeted at vascular endothelial growth factor in metastatic renal cell carcinoma: biology, clinical

results and future development

AUTHOR(S): Rini, Brian I.; Sosman, Jeffrey A.; Motzer, Robert J. CORPORATE SOURCE: Taussig Cancer Center, Cleveland Clinic Foundation,

SOURCE: BJU International (2005), 96(3), 286-290

CODEN: BJINFO; ISSN: 1464-4096 PUBLISHER: Blackwell Publishing Ltd. DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

AB A review. A growing understanding of the underlying biol. of renal cell carcinoma (RCC) has identified vascular endothelial growth factors a logical therapeutic target. Therapy directed against the biol. activity

of VEGF has undergone initial clin. testing in metastatic RCC, with evidence of a substantial antitumor effect. Biol. of VEGF expression in RCC, clin. results of VEGF-targeted therapy in RCC, anti-VEGF antibody (bevacizumab), small-mol. VEGF receptor

inhibitors, and ongoing clin, trials of VEGF-targeted therapy in

RCC are discussed.

OS.CITING REF COUNT: THERE ARE 20 CAPLUS RECORDS THAT CITE THIS RECORD (20 CITINGS)

REFERENCE COUNT: 3.4 THERE ARE 34 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 16 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2004:649278 HCAPLUS DOCUMENT NUMBER:

142:277392

TITLE: VEGF-targeted therapy

AUTHOR(S): Takahashi, Yutaka; Mai, Masavoshi

CORPORATE SOURCE: Cancer Research Institute, Kanazawa University, Japan

SOURCE: Gendai Iryo (2004), 36(7), 1481-1485

CODEN: GEIRDK; ISSN: 0533-7259

PUBLISHER: Gendai Iryosha

DOCUMENT TYPE: Journal; General Review

LANGUAGE: Japanese

A review. The topics discussed are (1) angiogenic mitogen vascular

endothelial growth factor (VEGF) and VEGF targeted therapy; (2) efficacy of VEGF antibody bevacizumab against metastatic colon cancer; (3) effect of VEGF antibody on other tumors; and (4) VEGF family and VEGF

receptor inhibitors.

L8 ANSWER 17 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2004:504576 HCAPLUS

DOCUMENT NUMBER: 142:131536

TITLE: Angiogenesis in multiple myeloma

AUTHOR(S): Uneda, Shima; Hata, Hiroyuki Dep. of Immunology, Roswell Park Cancer Institute, CORPORATE SOURCE:

Buffalo, NY, USA SOURCE:

Ketsueki, Shuyoka (2004), 48(3), 268-273

CODEN: KETSBI; ISSN: 0915-8529

Kagaku Hyoronsha Journal; General Review PUBLISHER:

DOCUMENT TYPE:

LANGUAGE: Japanese

A review. The topics discussed are (1) bone marrow angiogenesis in AB multiple myeloma; (2) clin. significance of microvessel d.; (3) vascular endothelial growth factor (VEGF), angiopoietin, hepatocyte growth factor (HGF), nitric oxide (NO) in bone marrow angiogenesis in multiple myeloma; and (4) thalidomide and VEGF receptor inhibitor in the inhibition of angiogenesis for the treatment of multiple myeloma.

L8 ANSWER 18 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2004:78652 HCAPLUS

DOCUMENT NUMBER: 141:291249

TITLE: Novel radiosensitizers for locally advanced epithelial tumors: inhibition of the PI3K/Akt survival pathway in

tumor cells and in tumor-associated endothelial cells

as a novel treatment strategy?

AUTHOR(S): Riesterer, Oliver; Tenzer, Angela; Zingg, Daniel; Hofstetter, Barbara; Vuong, Van; Pruschy, Martin;

Bodis, Stephan

CORPORATE SOURCE: Department of Radiation Oncology, University Hospital Zurich, Zurich, CH-8091, Switz.

International Journal of Radiation Oncology, Biology, SOURCE:

Physics (2004), 58(2), 361-368 CODEN: IOBPD3; ISSN: 0360-3016

PUBLISHER: Elsevier Science Inc. Journal; General Review DOCUMENT TYPE:

LANGUAGE: English

A review. In locally advanced epithelial malignancies, local control can be achieved with high doses of radiotherapy (RT). Concurrent

chemoradiotherapy can improve tumor control in selected solid epithelial adult tumors; however, treatment-related toxicity is of major concern and the therapeutic window often small. Therefore, novel pharmacol. radiosensitizers with a tumor-specific mol. target and a broad therapeutic

window are attractive. Because of clonal heterogeneity and the high mutation rate of these tumors, combined treatment with single mol. target radiosensitizers and RT are unlikely to improve sustained local tumor control substantially. Therefore, radiosensitizers modulating entire tumor cell survival pathways in epithelial tumors are of potential clin. use. We discuss the preclin. efficacy and the mechanism of three

different, potential radiosensitizers targeting the PTEN/PI3K/Akt survival pathway. These compds. were initially thought to act as single-target agents against growth factor receptors (PKI 166 and PTK 787) or protein kinase C isoforms (PKC 412). We describe an addnl. target for these

compds. PKI 166 (an epidermal growth factor [EGF] receptor inhibitor) and PKC 412, target the PTEN/PI3K/Akt pathway mainly in tumor cells, and PTK 787 (a vascular endothelial growth factor [VEGF]

receptor inhibitor) in endothelial cells. Even for these broader range mol. radiosensitizers, the benefit could be restricted to human epithelial tumor cell clones with a distinct mol. profile.

Therefore, these potential radiosensitizers have to be carefully tested in specific model systems before introduction in early clin. trials. THERE ARE 9 CAPLUS RECORDS THAT CITE THIS RECORD OS.CITING REF COUNT:

(9 CITINGS)

THERE ARE 42 CITED REFERENCES AVAILABLE FOR THIS REFERENCE COUNT: 42 RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

1.8 ANSWER 19 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN ACCESSION NUMBER: 2003:951423 HCAPLUS

DOCUMENT NUMBER: 140:52431

TITLE: VEGF-receptor inhibitors for anti-angiogenesis

AUTHOR(S): Shibuya, Masabumi

CORPORATE SOURCE: Inst. Med. Sci., Univ. Tokyo, Tokyo, 108-8639, Japan

SOURCE: Nippon Yakurigaku Zasshi (2003), 122(6), 498-503

CODEN: NYKZAU; ISSN: 0015-5691 PUBLISHER: Nippon Yakuri Gakkai

DOCUMENT TYPE: Journal; General Review

LANGUAGE: Japanese

A review. Angiogenesis is deeply involved in the progression of major diseases such as cancer, diabetes, and rheumatoid arthritis. Mol. mechanism on angiogenesis was extensively studied, and several signaling systems including VEGF (VEGF-A), angiopoletin, PDGF, and ephrin were shown to be crucial for physiol. angiogenesis. Interestingly, among these factors, VEGF appears to play key roles in most of the pathol. angiogenesis, and other factors are considered to have addnl. effects on its development depending on the situation. VEGF binds and activates two tyrosine kinase receptors, VEGFR-1 (Flt-1) and VEGFR-2 (KDR/Flk-1), and stimulates endothelial cell growth, survival, and vascular permeability. VEGF induces not only tumor angiogenesis but also blood-vessel-dependent metastasis. Based on the importance of VEGF in diseases, many companies and institutes are now trying to generate appropriate small mols. as well as proteins that strongly antagonize the VEGF-VEGFR system. Several mols. quite effective for suppression of tumorigenesis and pathol. angiogenesis in animal models are under clin. trials.

THERE ARE 10 CAPLUS RECORDS THAT CITE THIS OS.CITING REF COUNT: 10 RECORD (10 CITINGS)

ANSWER 20 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2003:791933 HCAPLUS

DOCUMENT NUMBER: 140:233226

TITLE: Metastasis and angiogenesis: recent researches and

clinical implication of VEGF and VEGFR

AUTHOR(S): Takahashi, Yutaka; Kitadai, Yasuhiko; Mai, Masayoshi CORPORATE SOURCE: Cancer Research Institute, Kanazawa University, Japan

Igaku no Ayumi (2003), 206(4), 261-264

CODEN: IGAYAY: ISSN: 0039-2359

PUBLISHER: Ishivaku Shuppan

DOCUMENT TYPE: Journal: General Review LANGUAGE:

Japanese

AB A review. The topics discussed are (1) vascular endothelial growth factor (VEGF) family members and VEGF receptors; (2) VEGF in promoting

lymphangiogenesis; (3) VEGF and its receptor KDR targeted treatment for human colon cancer; (4) anti-VEGF antibodies for cancer treatments; and

(5) VEGF receptor inhibitors for cancer

treatments.

SOURCE:

L8 ANSWER 21 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

2003:553652 HCAPLUS ACCESSION NUMBER:

DOCUMENT NUMBER: 139:332110

TITLE: Vascular endothelial growth factor receptor tyrosine

kinase inhibitors: PTK787/ZK 222584

AUTHOR(S): Thomas, Anne L.; Morgan, Bruno; Drevs, Joachim; Unger,

Clemens; Wiedenmann, Bertram; Vanhoefer, Udo; Laurent,

Dirk; Dugan, Margaret; Steward, William P.

CORPORATE SOURCE: Leicester Royal Infirmary, Leicester, UK

SOURCE: Seminars in Oncology (2003), 30(3, Suppl. 6), 32-38

CODEN: SOLGAV; ISSN: 0093-7754 PUBLISHER:

W. B. Saunders Co.

DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

A review. PTK787/ZK 222584 (PTK/ZK) is an oral potent and selective inhibitor of the vascular endothelial growth factor (VEGF)-mediated Flt-I and KDR receptor tyrosine kinases. PTK/ZK has been shown to reduce growth and microvasculature in s.c. implanted human tumor xenografts in nude mice. A clin. difficulty in evaluating angiogenesis inhibitors has been the usefulness of conventional study endpoints. Therefore, dynamic contrast-enhanced magnetic resonance imaging (DCE-MRI) has been studied as a pharmacodynamic marker of efficacy of PTK/ZK. Phase I studies are under way evaluating the optimum dose and schedule of oral PTK/ZK administered continuously to patients with advanced cancers of types known to overexpress VEGF. To date, particularly in patients with liver metastases from colorectal cancer treated with PTK/ZK, DCE-MRI has been a useful predictor of the biol, response of VEGF-receptor inhibition. Toxicities have been manageable and have included lightheadedness, ataxia, nausea, vomiting, and hypertension. Stabilization of disease for ≥6 mo has been seen in heavily pretreated patients receiving PTK/ZK at higher doses. Preliminary data suggest that PTK/ZK can be administered safely on a continuous daily dosing schedule, efficacy data look promising, and DCE-MRI correlates with biol. response. DCE-MRI will be used to guide dose optimization of PTK/ZK

and perhaps of other angiogenesis inhibitors in future studies. OS.CITING REF COUNT: 52 THERE ARE 52 CAPLUS RECORDS THAT CITE THIS

RECORD (52 CITINGS)

REFERENCE COUNT: 27 THERE ARE 27 CITED REFERENCES AVAILABLE FOR THIS

RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

ANSWER 22 OF 22 HCAPLUS COPYRIGHT 2009 ACS on STN

ACCESSION NUMBER: 2000:257676 HCAPLUS

DOCUMENT NUMBER: 133:26379

TITLE: Less is more, regularly: metronomic dosing of

cytotoxic drugs can target tumor angiogenesis in mice AUTHOR(S): Hanahan, Douglas; Bergers, Gabriele; Bergsland, Emily CORPORATE SOURCE: Department of Biochemistry and Biophysics, Hormone Research Institute, University of California San

Francisco, San Francisco, CA, USA

Journal of Clinical Investigation (2000), 105(8), SOURCE:

1045-1047

CODEN: JCINAO; ISSN: 0021-9738

American Society for Clinical Investigation PUBLISHER:

DOCUMENT TYPE: Journal: General Review

LANGUAGE: English

A review with 23 refs. Chemotherapeutic drugs, long the mainstay of cancer treatment, cause DNA damage and disrupt DNA replication in proliferating cells. Drug regimens have been designed to kill as many tumor cells as possible by treating with "maximum tolerated doses" (MTD5) of these cytotoxic agents. Side effects such as neurotoxicity and damage to proliferating cells in healthy tissues pose serious constraints on the use of chemotherapy. The harsh side effects and the ultimate failures of most chemotherapies have fueled broad investigation of alternatives, including

drugs that target not the transformed tumor cells themselves, but rather a genetically stable constituent cell type of tumors, the endothelial cells that form blood vessels. Angiogenesis, the process by which new blood vessels are formed, is a hallmark capability of cancer; a compelling body of evidence argues that tumor growth depends on the vasculature, and, in particular, on continuing angiogenesis. In particular, metronomic dosing with cytotoxic drugs, while demonstrably antiangiogenic, seem unlikely to prove efficacious in general as single agents. Nevertheless, we believe that metronomic delivery of lowered doses of cytotoxic drugs could be devised to minimize often devastating side effects of chemotherapy, while targeting endothelial and tumor cells. True efficacy may come only with combinatorial therapies, wherein novel cytotoxic dosing schedules are used in conjunction with other drugs or radiation. Possible combinations include other approved drugs, such as cox-2 inhibitors, thalidomide, or IFN- α/β , as well as exptl. drugs such as VEGF/ VEGFreceptor inhibitors, other angiogenesis inhibitors (e.g., TNP-470), proapoptotic drugs, or biotherapeutic agents such as oncolytic viruses. The possibilities raised by these studies are

provocative and deserve further preclin. and clin. investigation.

OS.CITING REF COUNT:

205 THERE ARE 205 CAPLUS RECORDS THAT CITE THIS RECORD (205 CITINGS)
23 THERE ARE 23 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT